



Emergency Renovation Notification

I hereby notify the Department of Environmental Quality Asbestos Control Program of an emergency renovation that falls under the guidelines of 40 CFR 61.145(a)(4)(iv):

ALL FIELDS ARE REQUIRED

Name:

Phone Number:

Company Name:

Email Address:

Site Name:

Site Address: .

Site City:

Date emergency occurred: .

Hour emergency occurred:

☐ AM

☐ PM

Brief description of the sudden, unexpected event:

Briefly explain how the event caused an unsafe condition, or would cause equipment damage or an unreasonable financial burden:

Print a copy of this notification before submitting it to DEQ.

☐ I understand that pursuant to ARM 17.74.358, a completed application for an asbestos project permit must be submitted within five working days after the initial notice.

PRINT

SUBMIT BY EMAIL

Department of Environmental Quality
Waste and Underground Tank Management Bureau Asbestos Control Program
1520 E. Sixth Avenue
P.O. Box 200901
Helena, MT 59620-0901

Office Phone: 406-444-5300 / Fax: 406-444-1374
Thank you! Your information will be processed as soon as possible.

Got questions, email us: deqacponline@mt.gov
Visit the program website at: www.asbestos.mt.gov

Got List Serve? Sign up for ACP news List Serve at <http://svc.mt.gov/deq/ListServe/asbestosStep1.asp>

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